PTO/SB/06 (12-04)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or ocket Number		
	A	D - PART I (Col	ART I (Column 2) SMALL ENTITY		OR	OTHER SMALL						
FOR NUMBER FIL		ER FILED	NUMBE	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)		
	SIC FEE CFR 1.16(a), (b), or (	(6))	·			1	1,41,2147	395		7411-157	000	
SEA	ARCH FEE					1		<u> </u>			150	
(37 CFR 1.16(k), (i), or (m)) EXAMINATION FEE						┨┠						
(37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS						<b>↓</b> ↓						
(37 CFR 1.16(i))			minus 20	) <u> </u>			x <b>∂</b> 5=		OR	×50 =		
	EPENDENT CLA CFR 1.16(h))	IMS	minus 3	= •		1 [	× 100			×300		
APF FEE	If the specification and drawings exceed 100  APPLICATION SIZE FEE is \$250 (\$125 for small entity) for each additional On sheets for maction the Fixed additional On the Fixed additional On the Fixed as the Fixed additional On the Fixed as					1-7-12x		- September 19	( २५ ४ <b>व</b> ज्याते		The second section is	
MUI	LTIPLE DEPEND	ENT CLAIM PRES					081			360		
• If 1	he difference in c	column 1 is less tha	an zero, ent	ter "0" in column:	2.	-	TOTAL		. ·	TOTAL		
-	APPL	LICATION AS	AMENDE	ED – PART II						OTHER	THAN	
	110	(Column 1)	<del></del>	(Column 2)	(Column 3)		SMALL	NTITY	OR	SMALL		
NT A	,	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)	
	Total (37 CFR 1.16())	.31	Minus	554	=	] [	x 75 =		0R	x50=		
AMENDMENT	Independent (37 CFR 1.16(h))	. 6	Minus	(0	=	[	×100=		OR	200		
ME	Application Size	e Fee (37 CFR 1.1	6(s))			1 [			7		7	
_ ^	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDE	NT CLAIM (37 CF	R 1.16(j))		180		OR	360		
							TOTAL: ADD'L FEE	·	OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)	•	-					
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)	
≥	Total (37 CFR 1.18(i))	·	Minus	**	=		×35 =		OR	×5O₌		
AMEND	Independent (37 CFR 1.16(h))		Minus	***	=		×100=		OR :	A00		
Ş	Application Size	e Fee (37 CFR 1.1	6(s))		*			:	-	<u> </u>		
	FIRST PRESENTA	ATION OF MULTIPLE	E DEPENDE	NT CLAIM (37 CF	R 1.16(j))		180	<u>-</u>	OR	360		
TOTAL . ADD'L FEE									OR	TOTAL ADD'L FEE		
	<ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".</li> <li>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</li> </ul>											

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The Highest number Previously Paid For (10tal of independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT	APPLICATION FEE DETERMINATION RECO	RD
	Effective October 1, 2003	

Application or Docket Number

10400288

CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	MALL EN	IIIIY	OR	OTHER	
TOTAL CLAIMS 37				<u>.,                                    </u>	COID		ſ	RATE	FEE		RATE	FEE
FO			O'] NUMBER FILED		NUMBER EXTRA		-	BASIC FEE	385.00	OR	BASIC FEE	
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H	EPENDENT C			nus 3 =			1			OR		864
		DENT CLAIM PE		102.3 =		3		X43≖		OR	X86=	258
	CHIPLE DEFEN	DENT COURT	1605141					+145=		OR	+290=	290
• If	the difference	in column 1 is i	ess than ze	ero, enter	70" in 0	olumn 2		TOTAL		OR	TOTAL	2182
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALLE	ENTITY	OR	OTHER SMALL	
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 59	Minus	-6	3	- /		X\$ 9=		OR	X\$18=	
ME	independent	. 6	Minus	••• (	2	/		X43=		OR	X86=	•
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIN			+145=		OR	+290=	
		ı	TOTAL	· ·		TOTAL						
	•	(Caluma 4)		(Cales	M	(Column 3)		ODIT. FEE		QA	ADOIT. FEE	
NT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colui HIGH NUM PREVI	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMEHOMENT	T- dal	•	Minuts	••		•	11	XS 9=		OR	XS18=	
E	Independent		Minus			•		X43=			X86=	
4	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	ENDEN	CLAIM					OR		
								-:45=		OR	+290=	
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		Column 1.			<u> 5.</u>	Ct umn 3)	,					
ENT C		CLANS REMAINING AFTER AMENDMENT		FIGH NUM PREVI PAID	BER CUSLY	PRESENT EXTRA		PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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AMENDA	Independent	•	Minus	***		•		X43=		OR	X86=	
Ľ	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDEN	CLAIM		1				-	
	* If the entry in column 1 is less than the entry in column 2, write "7" in column 3							+145=		OR	+290=	
-	the Highest Nu	mber Previously Pa	ld For IN TH	S SPACE	s tess tha	n 20. enter "20.	` •	TOTAL LODIT FEE		OR	ADDIT FEE	
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1												

## Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 10900288 Effective October 1, 2003 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN OR SMALL ENTITY TYPE -(Column 1) (Column 2) **TOTAL CLAIMS** FEE FEE RATE RATE OR BASIC FEE 770.00 BASIC FEE 385.00 NUMBER FILED NUMBER EXTRA FOR 48 TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= 864 OR 3 INDEPENDENT CLAIMS 0 minus 3 = X43= X86= 258 OR MULTIPLE DEPENDENT CLAIM PRESENT 4 +290= +145= 290 OR If the difference in column 1 is less than zero, enter "0" in column 2 OR TOTAL 2182 TOTAL OTHER THAN **CLAIMS AS AMENDED - PART II** SMALL ENTITY SMALL ENTITY OR (Column 3) (Column 1) (Column 2) CLAIMS HIGHEST ADDI-ADDI-⋖ REMAINING NUMBER PRESENT TIONAL RATE RATE TIONAL PREVIOUSLY AMENDMENT AFTER **EXTRA** FEE FEE **AMENDMENT** PAID FOR XS18= XS 9= **Total** Minus OR Independent Minus \*\*\* = X86= X43= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST ADDI-ADDI-8 REMAINING NUMBER PRESENT TIONAL TIONAL RATE RATE AFTER **PREVIOUSLY** IDMENT **EXTRA** FEE AMENDMENT PAID FOR FEE T- dal Minus XS 9= X\$18= \*\* OR Ē Independent Minus X86= X43 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= -:45= OR TOTAL OR ACCIT FEE ADDIT FEE Column 1) ·Column 2: Column 3) ADDI-ADDI-TIONAL RATE TIONAL FATE FEE

		COICHILLI		- Columnia	-0.00
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT		FIGHEST NUMBER PREVIOUSLY PAID FIR	PRESENT EXTRA
NO.	Total	•	Miras	**	=
ME	Independent	•	Minus	224	a
٩	FIRST PRESE				

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3 lenter "3." The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1

OR

OR

OR

XS18=

X86=

+290=

ADDIT FEE

TOTAL

FEE

XS 9=

X43=

+145=

ADDIT FEE

TOTAL

<sup>&</sup>quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."